

<div style="text-align: center;"> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border-bottom: 1px solid black; width: 30%;"></div> <div> CAREER DEVELOPMENT PROGRAM SCHOOL/CONSORTIUM NAME ANNUAL REPORT FY' 2008-2009 </div> </div> </div>	
DUE: May 31st	
NUMBER OF STUDENT CONTACTS: (# of professional contacts with individuals, involving an exchange of information)	TOTAL
Academic	
Career Development	
Personal /Social	
SCHOOL CONTACTS: (# of professional contacts involving an exchange of information regarding program/student/concern..)	
Teacher (re CD program)	
Teacher (re student/s)	
Other Student Personnel Workers	
Referral Agencies	
Administration	
Parents	
OTHER ACTIVITIES:	
Classroom and/or Group (presentations or activities, etc)	
Students Tested (# of students taking assessment or receiving interpretation)	
Contacts with Grads (phone, e-mail, in-person)	
Contacts with Dropouts (phone, e-mail, in-person)	
Contacts with Adults (phone, e-mail, in-person)	
Contacts with colleges & industry (phone, e-mail, in-person)	
Meetings (professional, student, community, staff, etc)	
Other	
NARRATIVE: Attach a narrative to describe the activities completed in addition to those identified in the program of work. Also, briefly summarize highlights that have added to the success of your program this year.	

Submit the completed annual report, advisory committee report form and minutes (including a motion "to Continue" the CD Counseling Program for the upcoming school year) to:

alea@nd.gov or fax to: 701-328-1255.